

TENNESSEE CORRECTIONS INSTITUTE ANNUAL JAIL DATA PROFILE

Facility Name:										
Date of Inspection: (Month, Day, Year)										
Date of Construction: (Month, Year)										
Date of Last Renovation : (Month, Year) Male Female Current Number of Inmates										
Certified Beds			Female		Current Number of Inmates			<u>inmates</u>	۰	
Total Certified Capacity				Total Male: Total Female:						
Population Day of Inspection				TDOC I			Backup Males: Backup Females:			
Average Daily Population				Comi	ments:					
Number of Detention Staff Full Time					Part Time					
New Positions Created Since Last Inspection										
Number of New Hires Since Last Inspection										
Does the Detention Staff also perform as: Dispatchers?					Yes No		No			
Patrol Officers?					Yes			No		
Other (Specify)										
Total Annual Jail Budget \$										
(For this item, include janitorial supplies, maintenance and repair, medical and dental care, detention staff salaries, and contractual services)										
Are you presently renovating, constructing, or planning a new detention facility?										
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If yes, what is planned and when do you expect to complete it?										
Insurance Provider:										
Address:							_			
Telephone:										

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